



ITEM MAINTENANCE REQUEST

PURCHASING & CONTRACT ADMINISTRATION – VISION

Please mail this form to:
Purchasing & Contract Administration
128 State Street
Montpelier, VT 05633-7501
Attn: Pat Newhall

OR Fax to:
Purchasing & Contract Administration
Attn: Pat Newhall
Fax #: 1 (802) 828-2222

Requester Name: _____
Requester Department/Agency: _____

Requester E-Mail: _____
Telephone #: _____

Please supply the following information to Purchasing & Contract Administration to enable them to establish the item.

Please check one: ☐ New ☐ Update* ***Item Number:** _____

Define Item:

Item Name/Short Description: _____

Long Description: _____

Unit of Measure: _____

Dimensions: (These are optional)

Shelf Life (Days): _____

Length: _____

Height: _____

Width: _____

Dimension UOM: _____

Weight: _____

Weight UOM: _____

Volume: _____

Volume UOM: _____

Recycled: Yes ☐ No ☐

Purchasing Attributes:

Standard Price: _____

Item Vendor Number*: _____

**Purchasing
Use Only**

Item Created: ☐ Yes ☐ No

Item Number: _____

Date Created: _____

Created By: _____

Item Maintenance Request Continued

The following are fields that should be set up by Departments, if they intend on tracking this item in their inventory.

Item Ship To Location:

Location Code*: _____

Item Attributes by Unit

Cost Element: _____

Current Purchase Cost: _____

Replenishment*:

Reorder Point: _____ The point at which more should be reordered

Maximum Quantity: _____ The maximum quantity wanted on hand

***These are required if the item is going to be an inventory item that will go through the automated replenishment process.**